

REQUEST FOR PRE-APPLICATION CONFERENCE

SECTION I: APPLICANT & PRIMARY CONTACT INFORMATION

Applicant Name: _____

Affiliation with the Project: _____

Mailing Address: _____

Phone: _____ Fax: _____

Primary Contact Name: _____

Affiliation with project: _____

Phone: _____ Fax: _____

Email: _____

SECTION II: PROPERTY INFORMATION

Name of Property Owner: _____

Mailing Address: _____

Phone: _____ Fax: _____

Address of Subject Property: _____

General Location and Assessor's Parcel Number: _____

Existing Zoning: _____

Description of proposal or proposed land use: _____

SECTION III: SUBMITTAL REQUIREMENTS

Please provide two (2) copies of a “Sketch Plan” including the following information:

Office

Check-in

Use Only

Applicant

Checklist

- | | |
|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> Project narrative (scope of work proposed) |
| <input type="checkbox"/> | <input type="checkbox"/> Location/vicinity map and north arrow |
| <input type="checkbox"/> | <input type="checkbox"/> Three (3) 24” x 36” copies of scale drawing of the site plan of proposed development |
| <input type="checkbox"/> | <input type="checkbox"/> Location of all public arterial and collector streets |
| <input type="checkbox"/> | <input type="checkbox"/> Acreage and land uses of all parcels |
| <input type="checkbox"/> | <input type="checkbox"/> Table of land use data including: gross and net acres; percent of open space, parking, and tentative lot sizes (if applicable) |
| <input type="checkbox"/> | <input type="checkbox"/> F.E.M.A. information (if applicable) |
| <input type="checkbox"/> | <input type="checkbox"/> Tentative proposals regarding water supply, sewage disposal and surface drainage |
| <input type="checkbox"/> | <input type="checkbox"/> Fees: Preliminary and/or Final Subdivision Plats \$300.00 (once paid, credit will go toward plat fee) Commercial Site Plans \$150.00 |

I have read this Request for a Pre-Application Conference Application and understand that if my application is not complete in all respects it will not be processed until such time as it is complete. I also understand that it may take up to four weeks to receive a response to this application and possibly up to seven weeks before a meeting is scheduled.

Signature of Applicant

Print Name

Date

Signature of Property Owner

Print Name

Date

***If more than one owner, attach additional sheet with names, addresses and signatures**

OFFICE USE ONLY

Case #: _____ Fees: _____

Date of Submittal: _____ Accepted by: _____

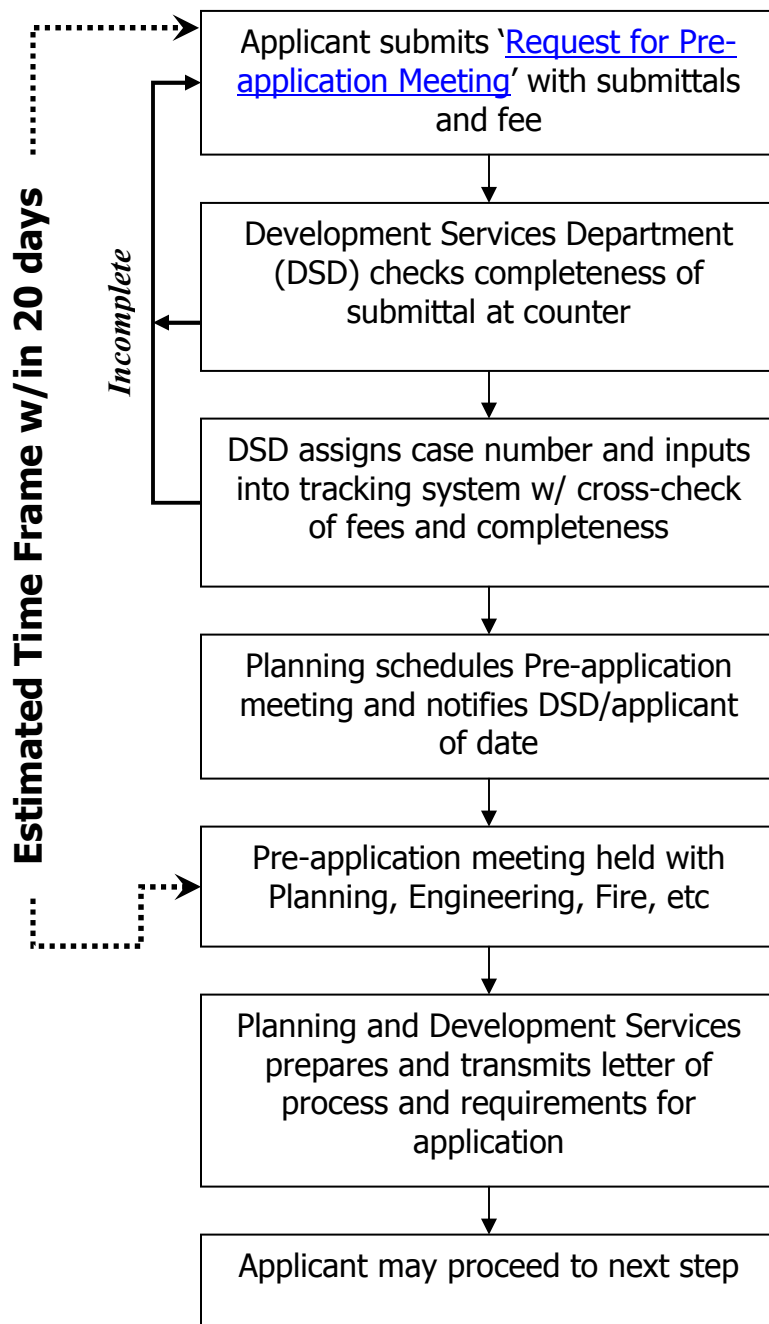
Date of Pre-Application Conference: _____

People Present at Meeting: _____

Staff Comments: _____

Tentative Timeframes for Planning Process: _____

**CITY OF MARICOPA
PRE-APPLICATION MEETING
Staff Review**



Submittals

- 1 - [Request](#)
- Project Narrative
- 2 - Sketch Plan (See Application for sketch plan requirements)
- 3 - 24" x 36" Scaled Site Plans
- Fee – See [Fee](#)



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